



**JOINT APPROPRIATIONS COMMITTEE  
ON HEALTH AND HUMAN SERVICES**

# **Child Well-Being Transformation Council Recommendations**

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# Background on CWBTC

- In 2018, the General Assembly created the time-limited Child Well-Being Transformation Council for the purpose of coordinating, collaborating, and communicating among agencies and organizations involved in providing public services to children, primarily in the child welfare system.
- The 25-member Council, chaired by Rep. Sarah Stevens and Sen. Joyce Krawiec, met eight times between Dec 2018 and July 2020.
- The Council made 17 recommendations of changes in child welfare law, policy, or practice
  - 8 recommendations to be implemented/addressed by DHHS

# 8 DHHS Directed Recommendations

- **1:** Establish policies and procedures to begin coordinating post-transition planning for a youth in foster care beginning no later than 90 days after the youth's 17th birthday.
- **2:** Define the permanency plan process and requires such plans to begin sooner and be finalized earlier to ensure adequate planning time prior to children transitioning out of the system.
- **3:** Develop and implement a plan to keep foster children in community settings to avoid residential behavioral placements.
- **5:** Develop standardized trauma informed assessment tools and to require only trained clinicians deemed appropriate to assess the applicability of such tools and ensuring fidelity.
- **6:** Establish oversight, increase the use of, explore reducing the ages, and develop potential incentives for these programs.
- **7:** Explore establishing an MOA for regional social services staff to be potentially housed in local council of government office spaces with the Association of Council of Governments.
- **8:** Report on the approved Family First Prevent Services (FFPSA) programs, the amount of federal funds obtained from using them, and strategies to improve and expand the use of such programs.
- **13:** Establish seven regions for supervising county DSSs and provide oversight and support to those regions with 11 staff and create formal education and training sessions for new county boards of social services members, which would be available statewide by September 2020.

# North Carolina Child Welfare System Transformation

- North Carolina's child welfare transformation work is well underway and is inclusive of both our federal and local partners
- The 3 significant areas of focus include:
  1. Increasing state support and assistance for local child welfare agencies (Rylan's Law)
  2. Improving data collection and reporting to inform decision-making and increase accountability (Automated Child Welfare System)
  3. Increasing investment in prevention to help safely preserve family units and keep children out of foster care (FFPSA)
- Child Welfare transformation is aligned with the recommendations from the Child Well-Being Transformation Council

# **Goal 1: Increasing State Support and Assistance**

- **North Regional Support – Recommendation 13**
- **Council of Governments Space – Recommendation 7**
- **Implementation of a state-wide Practice Model**
- **Implementation of Policy Design Teams**
  - **Transition Age Youth Investments Recommendation 1 & 2**
  - **KinGap Recommendation 6**

# **Recommendations 7 and 13: Physical Space Needs and Regional Support**

- **Promote the consistent implementation and interpretation of policy across the state**
- **Improve practice by developing and implementing Continuous Quality Improvement plans**
- **Support local agencies in implementation of policy with training and technical assistance**
- **Strengthen state supervisory role of the administration of social services programs by counties**
- **Provide technical assistance to local agencies to support accurate data collection and accountability**

# **Recommendations 7 and 13: Physical Space Needs and Regional Support**

- **Child Welfare has redeployed more than 40 positions - No new positions have been appropriated**
- **A fully implemented regional team for child welfare would consist of 3 CWRCs and 2 trainers:**
  - **1 for Safety (Intake and Investigations)**
  - **1 for Permanency (Foster Care)**
  - **1 for Data and CQI plans and monitoring**
  - **2 Trainers**
- **At this time, given no additional staff and without Regional Directors, physical space is not needed**
- **As additional positions are allocated, work with the Council of Governments about space options will be launched**

# Implementation of a Practice Model and Design Teams - Recommendations 1, 2, and 6

- **Statewide Practice Model**
  - Ensure child welfare services are provided consistently across all counties
  - Improve outcomes for children and families via decision-support tools
- **Implementation of Policy Design Teams**
- **Transition Age Youth Investments ( Recommendations 1 and 2)**
  - Permanency Design Team concurs with recommendation to begin transition planning no later than 90 days after a child's 17<sup>th</sup> birthday
  - This change will be implemented by July 2021
  - Policy will also ensure that youth are engaged in their planning as well as changes made to their plan

# **Guardianship Assistance “KinGap” – Recommendation 6**

- **DHHS has established the KinGap program to support kinship caregivers**
- **Caring for Our Own, is a statewide program providing a tailored option for kinship caregivers to become licensed as foster parents**
- **DSS supports decreasing the age from 14 to 12 for eligibility for subsidized guardianship and is currently assessing the fiscal impact of this proposed change.**

## **Goal 2: Improving Data Collection and Accessibility**

- **Requires implementing a statewide Child Welfare System**
- **Current progress:**
  - **Child Welfare Information System Governance Committee of state and county leaders established that shares decision making about the Child Welfare System**
  - **Modernization, augmentation and enhancement of DSS data platform to allow for more robust data collection and user-friendly interface**
  - **Building the Regional Support Model to provide technical assistance to ensure data driven decision-making and accountability**

# **Goal 3: Investing in Prevention – Recommendations 3, 5, and 8**

- **Developing a strategic roadmap to support foster children with behavioral health needs in community-based settings involving multi-payor systems (Recommendation 3)**
- **Three workgroups have been formed to:**
  - **Assist local DSS and LME/MCOs in placement of children**
  - **Intervene at the state level when individual counties need additional assistance finding behavioral health providers**
  - **Developing a suite of trauma informed statewide services that include improved assessments and crisis response**
- **A standard assessment tool is a component of the Foster Care Specialty Plan in Medicaid Managed Care (Recommendation 5)**
- **The Department is engaging our external stakeholders and is on track for the July 2023 implementation (S.L. 2019-81)**

# **Families First Prevention Services Act – Recommendation 8**

- **Develop a continuum of supports for families by identifying services that will stabilize kinship or foster care placements**
- **Includes wrap around supports and increased access to services for foster children and the families caring for them**
- **Strategies to reduce the use of congregate care, promote the placement of children/youth in family like settings in the community, and increase the availability of evidence-based practices.**
- **The first phase of implementation of the menu of Evidence Based Services have been chosen from the front end of the prevention continuum**
  - **Triple P**
  - **Homebuilders**
  - **Parents as Teachers**

# Questions?